

REACH PLANNING GUIDE/CHECKLIST

(Should be finalized 30 days before dates of Training)

1. Dates of Training: Day of week: _____ Dates: Month: _____

2. Training Site: _____ Address: _____

G Site confirmed: _____ Site Contact person/ph: _____ G Agreement copy attached

3. Recruitment of Participants: *(Recommended to be no more than 30 -40 participants)*

G Participant Pre-registered List attached G Last day for registration: _____ / _____ / _____

4. Teachers as Participants

G Substitutes/sub office notified by: _____
date: _____ / _____ / _____

G Substitutes will not be used. List alternative method(s) _____

5. Registration

G Name tags, both days, by: _____ date
completed: _____ / _____ / _____

G Sign-in Sheets, both days, by: _____ date
completed: _____ / _____ / _____

G Copies of sign-in sheets submitted to USOE, by: _____
date: _____ / _____ / _____

G Registration Table: Day One: _____ Day
Two: _____

6. Participant Needs Assessment:

Completed by: _____
date: ____/____/____

Method: Gwritten survey Gquestionnaire

 Gtelephone survey Gother

 G Summary attached

7. Materials/Equipment by: _____

date: ____/____/____

 G VCR and Monitor - source: _____

 G Overhead Projector - source: _____

 G Cordless Microphone(s): source: _____

 G Extra Batteries Cordless Microphones: source _____/quantity G

 G Screen Pull down _____ Portable _____

 G Other Items: List _____
Name: _____

 G Flipchart Stand(s) source _____/quantity G

 G Post-It Flip charts: source _____/quantity G

 G Colored Markers for Participants: source: _____/quantity G

 G Pens for Overhead Transparencies: source: _____/quantity G

 G Masking Tape: source: _____/quantity G

 G Blue/Black Flipchart Pens Source: _____/quantity G

G "REACH for Kids" binders Source: _____/quantity G

G Project REACH binders Source: _____/quantity G

G High School REACH binders Source: _____/quantity G

G Ethnic Perspectives Sets Source: _____/quantity G

G Wall Posters: source: _____/quantity G

G We the People % posters G REACH Principles Posters G
REACH Values Posters

G Timer/Clock: source: _____ G Chimes/Bell:
source: _____

G Blank Overhead Transparencies:
source: _____

G Cassette/CD Player:
source: _____

G Music/CD/tape:
source: _____

G Participant's Handouts: source: _____/
quantity

G Day 1 Agenda: source: _____/quantity

G Day 2 Agenda: source: _____/quantity

G Day 3 Agenda: source: _____/quantity

8. Trainers:

Lead Trainer: _____ Notified: date: ____ / ____ / ____
by: _____

Co-Trainer: _____ Notified: date: ____ / ____ / ____
by: _____

Co-Trainer: _____ Notified: date: ____ / ____ / ____
by: _____

Co-Trainer: _____ Notified: date: ____ / ____ / ____
by: _____

Reach Certified Trainer: _____

All Others (Observers, etc.) _____

9. Trainers 2 Day training flowchart

G Completed: by: _____
date: ____ / ____ / ____

G Copy Attached

10. Diversity Perspectives (Contacted by Lead Trainer)

Name: _____

Name	Ethnicity	School/ Organization	Date	Time
1.				
2.				
3.				
4.				
5.				

G Diversity Letters Sent by: _____ date: ____ / ____ / ____

G Diversity Confirmation Letters Sent by: _____
date: ____ / ____ / ____

11. Training Room set-up: Who: _____
When: ____ / ____ / ____

G Number Participant's tables: G Rounds Number of seats per round table

G seats

G Number of Trainer's tables: G rectangular

G Overhead table(s) and screen(s) by: _____

G Registration Table: _____

G Materials Table: _____

G Diversity Perspective table:_____

G Refresh/break table: _____

12. Meals Set-up:	G # of rounds	G # of seats per round

13. Menu:

G Day 1	Lunch	Special Meals	G Yes	G No
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Break Name(s) 1. _____ 2. _____

3. _____

G Day 1	Lunch	Special Meals	G Yes	G No
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Break	Name(s)	1.	2.

3. _____

Meal count: Due: ____ / ____ / ____ by: _____

Number: G

14. Evaluations

G Day 1

Collected by: _____ date: ____ / ____ / ____

Copy sent to REACH Center: by: _____

date: / /

G Day 2

Collected by:_____ date:____/____/____

Copy sent to REACH Center: by:_____
date:____/____/____

G Day 3

Collected by:_____ date:____/____/____

Copy sent to REACH Center: by:_____
date:____/____/____

15. Registration Sign-In

G Day 1

A.M. Sign in: by:_____ P.M. Sign In:
by:____/____/____

Copy sent to EDEQ. USOE: date:____/____/____

G Day 2

A.M. Sign in: by:_____ P.M. Sign In:
by:____/____/____

Copy sent to EDEQ. USOE: date:____/____/____

G Day 3

A.M. Sign in: by:_____ P.M. Sign In:
by:____/____/____

Copy sent to EDEQ. USOE: date:____/____/____

16. Conference Room Set-up

G Poster/Walls: by:_____ When:____/____/____

G AV Equipment Set-up & check: by:_____

When: ____ / ____ / ____

G Registration Table: by: _____ When: ____ / ____ / ____

G Participant Tables: by: _____ When: ____ / ____ / ____

G Equipment and Materials Delivery & Return: _____

When: ____ / ____ / ____

17. Budget	Projected	Actual	+/- (Explain)
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G Conference Site:	_____	_____	_____
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G Meals/ Breaks:	_____	_____	_____
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G Curriculum Materials	_____	_____	_____
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G Other Materials:	_____	_____	_____
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Rentals: G AV	_____	_____	_____
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G Postage/Mailing:	_____	_____	_____
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Substitutes: G	_____	_____	_____
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G REACH Trainers	_____	_____	_____
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G Other (list):	_____	_____	_____
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G Other:	_____	_____	_____
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TOTAL	_____	_____	_____
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Prepared by _____ Date: ____ / ____ / ____

Approved by _____ Date: ____ / ____ / ____

